SUBMIT: <u>COMPLETED</u> APPLICATION, TAX STATEMENT, AND FEE TO:

**Bayfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

#### APPLICATION FOR PERMIT **BAYFIELD COUNTY, WISCONSIN**

Date Stamp (Received)

MAR 1 1 2021

ENTERED

Refund:

Permit #: **Amount Paid:** 

INSTRUCTIONS: No permits will be issued until all fees are paid.

Bayfield Co.
Planning and Zoning Agency

Checks are made pa					TO AP	PLICAN	IT. Ori	ginal	Applica	tion <u>N</u>	MUST	be subn	nitted	FILL	OUT IN INK	( <mark>NO</mark>	PENC	IL)
TYPE OF PERMIT				AND USE		TARY		VY	□ со	NDITIO			□ SPECIA	L USE	□ B.O.A.	□ 0	THER	
Owner's Name:		11/2	BER		Mail	ing Ad	Idress:	1/2	4TR	W W	City	State/	Zip:			Tel	ephone 41	4219
Address of Propert		000			N.	City/	State/Zip:	40	,,,,			DNE				Cel	ll Phon	a: 11/
JAME.	=				Con	tractor	r Phone:		Di	umber						Plu	192 umber F	994
Contractor:	A				Con	tractor	riione.			unibei								
Authorized Agent:	(Person Signi	ng Applica	tion on behalf	of Owner(s))	Age	nt Pho	ne:		Ag	gent M	ailing	Address	(include Cit	y/State/i	Zip):	Au	ritten Ithoriza tached Yes	
PROJECT LOCATION	Legal I	Descripti	on: (Use Ta	x Statement)		Tax	D# 5	35	786	99	7				ded Documen		wing Ov	
N 6 1/4, _	NW 1	/4	Gov't Lot	Lot(s)	CSM	Vol	l & Page	CSI	M Doc#		Lot(s	s) #	Block #	Subdiv	vision:			, #1
Section 2	1 , Towr	nship <u>E/</u>	LENN, R	ange	W		Town o	f:	IL	EEN	)			Lot Siz	ze	je:	Acrea	348
				300 feet of Ri f Floodplain?			(incl. Intermi			ance S	Structi	ure is fr	om Shoreli	ne : feet	Is your Pro in Floodp			Wetlands
☐ Shoreland —				1000 feet of L	ake, P	ond or			Dist	ance S	Structi	ure is fr	om Shoreli		Zone?			☐ Yes No
Non-Shoreland	d					,									- Auc			
Value at Time									To	tal#	of		V	/hat Ty	pe of		Zine (	Type of
of Completion * include		Project		Project			Project		be	droo	ms		CALL TO VICTOR AND ADDRESS OF THE PARTY OF T		ry System(s) <mark>operty <u>or</u></mark>			Water
donated time & material				# of Storie	:5	FOL	undation		p	on roper	ty			-	property?			on property
& illaterial	□ New	Constru	iction	☐ 1-Story		□В	asement			1		☐ Mu	nicipal/Ci	ty				☐ City
	☐ Addit	ion/Alt	eration	☐ 1-Story + Loft	+	□ F	oundatio	n		2		□ (Ne	ew) Sanita	ry Spe	ecify Type:			□ Well
12,000	□ Conv	ersion	-	☐ 2-Story		□ S	lab			3			nitary (Exi		Į.			
			sting bldg)					_		-	_		vy (Pit) o		aulted (min	200 ga	allon)	
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Existing Structor					pplied	for)	Length Length					Width: Width:			Heig Heig			
			II dill'elision	10)					N T						Dimensions			Square
Proposed	Use	<b>✓</b>					oposed S	n et								•	F	ootage
			-	Structure (fi				perty	/)					1	X	)		
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Residentia	ai Use		with a Porch							(	Х	)						
p. M.				with (2 <sup>nd</sup> ) with a De		1								(	X	}		
_				with (2 <sup>nd</sup> )										(	Х	)		
□ Commerc	ial Use			with Atta	ched (	Garag	je							(	Х	)		
			Bunkhou	ı <b>se</b> w/ (□ sani	tary, <u>o</u>	<u>r</u> □ s	leeping q	uarte	rs, <u>or</u> 🗌	cooki	ing & 1	food pre	p facilities)	(	X	)		
				lome (manufa										(	Х	)		
☐ Municipa	l Use		Addition	/Alteration ( ry Building (e	explair	) _	· / - (	-	10 45	سِماً	-	WW-	77	1 -	X	1 1	7	11.0
Rec'd fo	r Issuar	ce		ry Building (e ry Building A				_						13	30 × 73	).	8	160
			2, 12 (1,12)			THE STATE					174,1			1	Х	)		
APR (	05 202			Jse: (explain) _ nal Use: (expl										(	Х	)		
Secret	arial Sta	ff 🗆		explain)										(	Х	)		
I (we) declare that the (are) responsible for result of Bayfield Coproperty at any reas	nis application the detail and bunty relying o conable time fo	(including laccuracy on this imor or the purpo	any accompany of all information matter L(we) a ose of inspection	n I (we) am (are) pro m (are) providing in	been exposition been exposed and the second and the	amined I nd that it his appl	by me (us) an t will be relied lication. I (we	d to th d upon ) conse	e best of r by <b>Bayfie</b> l ent to cour	ny (our) d Count nty offici	knowle y in det ials char	dge and be ermining v ged with a	elief it is true, or whether to issue dministering co	orrect and e a permit. ounty ordir	. I (we) further ac	cept liab	ility which the above	h may be a described
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Authorized Age	(If y	ou are si	gning on bel	alf of the owne	r(s) a le	tter of	authorizat	ion m	nust acco	ompan	y this a	applicati	on)			ach		-
Address to sen	ıd permit _							_				If yo	u recently pu	ırchased	Copy of 1	ax St		

operty (regardless of what you are applying for)

Fill Out in Ink - NO PENCIL

V Location of: **Proposed Construction** Show / Indicate:

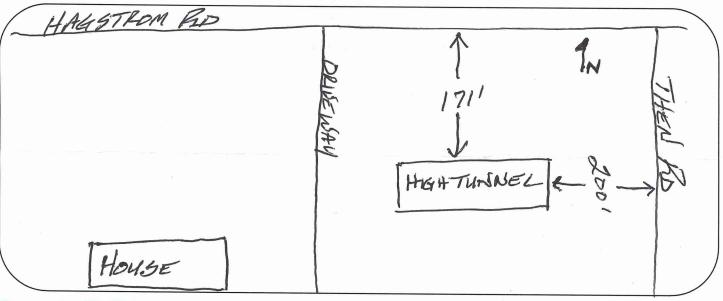
North (N) on Plot Plan Show Location of (\*): (3)

(\*) Driveway and (\*) Frontage Road (Name Frontage Road) Show: (4)All Existing Structures on your Property

(\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P) (5)Show:

(\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond (6)Show any (\*):

(7) Show any (\*): (\*) Wetlands; or (\*) Slopes over 20%



Please complete (1) – (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

7/			110 001 000 000 000 000 000 000 000 000	
	Feet		Setback from the <b>Lake</b> (ordinary high-water mark)	Foot
	Feet		Setback from the River, Stream, Creek	Feet Feet
	- 4		Setback from the Bank or Bluff	Feet
//	Feet	U		, , ,
1/2	Feet		Setback from Wetland	Feet
SK	Feet		20% Slope Area on the property	☐ Yes ☐ No
00	Feet		Elevation of Floodplain	Feet
_2	Feet		Setback to Well	Feet
	Feet			1-660
	Feet			
	JAKA SK	Feet Feet Feet Feet Feet Feet	Feet Feet Feet Feet Feet Feet Feet	Setback from the Bank or Bluff  Feet Setback from Wetland  SET Feet Setback from Wetland  SET Feet Setback from Wetland  Feet Setback from Wetland  Feet Setback from Wetland  Setback from Wetland

other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For the Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number:		# of bedrooms:	Sanitary Date:
Permit Denied (Date):	Reason for Denial:			
Permit #: 21-0044	Permit Date: 4-6	-21		•
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming    Yes   (Deed of Record   Yes   (Fused/Contigue)   Yes   (Fused/Contigue)   Yes   (Deed of Record   Yes   Yes   (Deed of Record   Yes   Yes   Yes   (Deed of Record   Yes   Yes	ous Lot(s)) 🔎 No	Mitigation Required Mitigation Attached	Yes No	Affidavit Required
Granted by Variance (B.O.A.)  ☐ Yes ☐ No Case #:		Previously Granted by  Yes No	/ Variance (B.O.A.)	#:
		Were Property Line	es Represented by Owner Was Property Surveyed	✓ Yes       □ No         □ Yes       □ No
Inspection Record:		1		Zoning District (A-/) Lakes Classification (N/A)
Date of Inspection: 3 -/- 21	Inspected by:	All	Date of Re-Inspection:	
Condition(s): Town, Committee or Board Conditions Attac USF as pro- Not for Hum	thed?   Yes   No-(If) 103ed  ran Habitalia	on sleeping	ched.)	
Signature of Inspector:				Date of Approval: 4/5/2/
Hold For Sanitary:  Hold For TBA:  Hold For TBA:	Hold For Affic	lavit: 🗌	Hold For Fees:	

rown, City, Village, State or Federal Permits May Also Be Required

After-the-Fact

AND USE - X SANITARY -SIGN -SPECIAL -CONDITIONAL -SOA -

# BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

ocation:	NE	1/4	of	NW	1/4	Section	24	Township	47	N.	Range	5	W.	Town of	Eileen
ov't Lot		Lot Block		ck	Subdivision						CSM#				

condition(s): Use as proposed. Not for human habitation or sleeping.

(Disclaimer): Any future expansions or development would require additional permitting.

ou are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or odification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

**IOTE:** This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed

or if any prohibitory conditions are violated.

#### **Tracy Pooler**

Authorized Issuing Official

**April 6, 2021** 

Date

### Town, City, Village, State or Federal Permits May Also Be Required

not completed or if any conditions are violated.

LAND USE - X
SANITARY - 20-156S
SIGN SPECIAL - NA
CONDITIONAL - NA
BOA -

## BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION

No: 05	5042003-2021	Tax ID: 15882	Issued To: RICHARD C COOLEY					
Locati 434	on: E 1/2 NE NE IN V.1054 P.884	Section 25	Township 47 N.	Range 05 W.	EILEEN			
Govt L	ot 1 Lot	Bloc	ck S	ubdivision:	CSM# NA			
For. R	esidential / Bedroom / 22L x 16W	x 12H						
	tion(s): Must maintain 63' setback tion agency and secure UDC perr This permit expires one year fro construction work or land use h	nit if required by Sta	tute or Contract.		chierman			
	Changes in plans or specification	-	e without	Authorized Issuing Official  Thu Apr 08 2021				
	obtaining approval. This permit application information is found	•	•					
	erroneous, or incomplete.			I	Date			
	This permit may be void or revol	ked if any performan	ice conditions are					

(Disclaimer): Any future expansions or development requires additional permitting.